2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

DOCUMENT# N14000007431

Entity Name: GAINES FAMILY REUNION, INC.

Current Principal Place of Business:

726 LENOXPLACE CIR RALEIGH, NC 27603

Current Mailing Address:

P.O. BOX 15752

TALLAHASSEE, FL 32317 US

FEI Number: 47-2793731 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GAINES FAMILY REUNION- TALLAHASSEE 7119 ED WILSON LANE TALLAHASSEE, FL 32317 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EDWARD L. GAINES 10/25/2023

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **TREASURER** Title VΡ

Name POPE, VIVIAN Name **NEALY-GAINES, WILLIAM**

Address P.O. BOX 15752 Address P.O. BOX 15752

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

Title FINANCIAL SECRETARY Title **PRESIDENT** Name GAINES, SYLVONDA GAINES, EDWARD L Name

Address P.O. BOX 15752 Address P.O. BOX 15752

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

Title **BUSINESS MANAGER** Title **CHAPLAIN**

Name POPE, TRENT Name GAINES, RAYMOND Address P.O. BOX 15752 Address P.O. BOX 15752

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

10/25/2023 SIGNATURE: EDWARD GAINES **PRESIDENT**

FILED Oct 25, 2023

Secretary of State 8431526216CC